

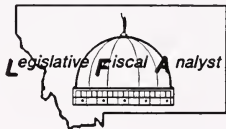
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# FOSTER CARE

A Report Prepared for the  
*Legislative Finance Committee*  
by

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## EXECUTIVE SUMMARY

### Foster Care Caseloads

The number of children receiving foster care services increased from 2,390 in fiscal 1985 to 3,310 in fiscal 1992, or 38 percent during the period. The number of children in foster care at fiscal year end increased even more significantly. At the end of fiscal 1992, 1,849 children were receiving foster care services compared to 1,027 children receiving services at the end of fiscal 1985—an 80 percent increase during the period. Foster care caseloads levels result from the numbers of children entering the system and the amount of time each child spends in the system. Although the number of children entering the system increased during the period (from 1,796 in fiscal 1985 to 2,188 in fiscal 1992), available data do not suggest that the average length of stay for all children has increased. However, the data do suggest that the number of children remaining in the foster care system for four years or more is increasing.

### Foster Care Services

Services provided through the foster care program range from family foster care (the least restrictive, least expensive service) to in-state and out-of-state residential care (the most expensive, most restrictive service). In between these services are group homes and shelter care services.

While group homes and shelter care services have remained constant since fiscal 1985 as a percentage of total services provided, there has been a

shift of services from family foster care to residential services, which are much more restrictive and expensive. In fiscal 1985, 74 percent of all service days were provided in a family setting, while 14 percent of total days were provided in a residential setting. In fiscal 1992, 71 percent of the service days were provided in a family setting, while the number of days provided in residential settings had increased to 17 percent of the total.

Available data does not suggest any clear reasons for this shift in the foster care service mix, but there may be at least one contributing factor. In fiscal 1991, the year medicaid coverage was first available for residential psychiatric treatment, use of these services began to increase significantly. Because the medicaid program is an "entitlement" program, the inclusion of residential psychiatric treatment as a medicaid service may have contributed to increased utilization of the service, both in and out-of-state. If a foster care child is medicaid-eligible and residential psychiatric treatment is deemed medically necessary, the child is entitled to the treatment and the state is obligated to pay for the treatment. Residential treatment was funded primarily by general fund through fiscal 1990, but when this service became a medicaid service, the state general fund had to bear only 28 percent of the cost of providing the service.

## Caseload Profiles

Foster care case loads were analyzed according to age, race, length of stay in the system, and reasons for entering the system.

Ages of children entering system - From fiscal 1985 through fiscal 1991, the number of children under five years of age and adolescents above the age of 14 have declined slightly as a percentage of total children entering the foster care system. Children under five comprised 26 percent of the children entering the system in fiscal 1985, while in fiscal 1991 this group accounted for 25 percent of the total. The number of adolescents above the age of 14 entering the system declined from 36 percent of the total in fiscal 1985 to 32 percent of the total in fiscal 1991. The number of children between the ages of five and 14 entering the system increased from 38 percent of the total in fiscal 1985 to 41 percent of the total in fiscal 1991.

Race of children entering system - Since fiscal 1985, a change has occurred in the racial make-up of children entering the foster care system. In fiscal 1985, 78 percent of the total children entering the system were caucasian and 15 percent of the total were Native Americans. In fiscal 1991, the number of caucasian children entering the system had decreased to 71 percent of the total, while Native American children comprised 20 percent of the total. The 1991 legislature appropriated funds for an anticipated increase in Native American children in the 1993 biennium, but data for the first half of fiscal 1992 indicates that no further increase has occurred.

Length of stay in the system - Although available data does not suggest that the aggregate, average length of stay in the foster care system has increased since fiscal 1985, certain data do suggest that the group of "long-term" children may be increasing as a percentage of total children in the system.

A "snapshot" analysis of children in the foster care system at the end of fiscal 1989 and fiscal 1991 was performed to determine how long each child had been in the system. At the end of fiscal 1989, 12 percent of the total number of children in the system had been in the system more than four years. At the end of fiscal 1991, the number of children who had been in the system longer than four years had increased to 21 percent of the total. During the same period, the number of children who had been in the system less than one year declined from 41 percent of the total to 39 percent of the total.

Reasons for entering system - The reasons an individual child is placed out-of-home in the foster system include child neglect, child abuse, sexual abuse and behavioral problems. An individual child may be placed out-of-home for one or a combination of reasons. The reasons most frequently recorded for out-of-home placement are child neglect and behavioral problems. Since 1985, the most significant change in the reasons recorded for out-of-home placement is a 55 percent increase in child neglect as a contributing factor.

## Foster Care Expenditures

Total foster care expenditures increased from \$6.1 million in fiscal 1985 to \$16.6 million in fiscal 1992, an increase of 173 percent during the period. Expenditures for family foster care increased by 78 percent during the period, while in-state and out-of-state residential treatment costs increased by 264 percent. Residential treatment costs increased much more rapidly than did

other costs during the period, causing the foster care expenditure mix to change significantly. In fiscal 1985, expenditures for in-state and out-of-state residential treatment accounted for 38 percent of total foster care expenditures, while family foster care expenditures comprised 42 percent of total expenditures. However, in fiscal 1992, residential treatment costs comprised 51 percent of total foster care expenditures and family foster care costs had decreased to 28 percent of total expenditures.

Daily service costs - Family foster care is not only the least expensive service provided in the foster care program (\$12.06 average daily cost in fiscal 1992), but the 19.5 percent increase in average daily costs since fiscal 1985 is less than any other service category. The average daily cost of in-state (\$88.05 in fiscal 1992) and out-of-state (\$111.35 in fiscal 1992) residential services increased 109 and 78 percent respectively from fiscal 1985 through fiscal 1992.

Funding mix - State special revenue (consisting of non-assumed county, parental and other contributions) and federal funds declined from 42 percent to 35 percent of total foster care funding from fiscal 1985 to 1992, while state general fund increased from 58 to 65 percent of the total during the same period. General fund expenditures for foster care increased by 206 percent from fiscal 1985 through fiscal 1992.

## PIPPS

In fiscal 1988, the Department of Family Services (DFS) began the Prevention, In-Home, Post-Placement Services (PIPPS) program. The program

goals are: 1) to avoid out-of-home placements of children at risk of such placements, 2) move children from more restrictive to less restrictive settings, and 3) to reduce the need for moving children from less restrictive to more restrictive settings. Available data indicate that children receiving PIPPS services actually receive more placements per child than do children who are not provided PIPPS services. Because some of these placements may be lateral (moving from one setting to another setting at the same level of restrictiveness) or moving from a more restrictive to less restrictive setting, the number of placements per PIPPS child may not be an accurate measure of the success or failure of the program.

Available data do suggest that children receiving PIPPS and out-of-home services re-enter the foster care system after leaving it as often as foster care children who have not received PIPPS. Although this would seem to indicate that the program is not as successful as it could be, the detailed information needed to draw such a conclusion is not available.

The department suspended the PIPPS program for the last two months of fiscal 1992 to help conserve general fund. (The program is funded entirely with general fund.)

# INTRODUCTION

State and federal statutes regulate the provision of foster care in foster family homes, in shelter and group homes, and in residential treatment. These laws define delinquent youth, youth in need of supervision, and youth in need of protective services. In addition, they address procedures for investigation, family intervention, and temporary and permanent placement. The Department of Family Services (DFS) is the agency charged with providing a continuum of services, including foster care, to needy youth.

The 1989 and 1991 legislatures expressed their intent that a continuum of services, including home-based services, foster care, and psychiatric treatment, should be available to Montana children. However, based on available information, they could not determine that all children in need of services were receiving appropriate services or that the necessary services were available. Therefore, House Bill 100 and House Bill 2, passed during the 1989 and 1991 legislative sessions respectively, required DFS to plan for a continuum of care in Montana. In addition, House Bill 304, passed by the 1989 legislature, established a medicaid program for psychiatric residential treatment for children. A report issued by the Legislative Fiscal Analyst (LFA) in April, 1990 provided a historical care and expenditure summary and a demographic analysis of Montana's foster care system during the period fiscal 1985 through 1989. This report provides a similar analysis for the period fiscal 1990 through 1992.

## House Bill 100

In House Bill 100, the 1989 legislature directed DFS to develop a plan to: 1) stabilize the rate system for existing child care providers; 2) quantify the number of children served, unserved, or underserved; and 3) complete the continuum of care necessary to address the needs of children in the custody of DFS by developing or enhancing programs in prevention of child abuse and neglect, family-based services, and intermediate and intensive levels of service. To stabilize the rate system, the 1989 legislature approved a program expansion of nearly \$3.3 million for the 1991 biennium (\$2,976,522 general fund, \$310,726 federal funds) to fund 85 percent of a model provider rate system in fiscal 1990 and 100 percent of the model rate in fiscal 1991.

The DFS response to House Bill 100 identified children who were served and underserved, but it stated that data for unserved children not in contact with DFS are generally unavailable due to severe limitations in the current DFS management information system and limited DFS staff available for research. Underservice may be partially attributable to the imposition of an informal "one-in, one-out" policy, generally in the fourth quarter of each fiscal year and the suspension of the special services programs, including PIPPS, from April to July, 1992. The "one-in, one-out" policy and suspension of special services are both budget management tools that reduce service levels.

DFS did identify additional resources that management believed necessary to provide a continuum of care for Montana's children, including: 1) a management information system; 2) 108 FTE social workers, 32 FTE

supervisors, and 10 FTE family resource specialists; 3) in-home family support services; and 4) additional out-of-home services, including therapeutic foster care and group homes. For the 1993 biennium, the 1991 legislature (in regular and special sessions) subsequently appropriated general and federal funds of \$652,143 for a management information system, nearly \$550,000 for 8.0 additional FTE social workers, and nearly \$1.5 million for an expanded continuum of care.

## House Bill 2

The 1991 legislature approved House Bill 2 language defining the continuum of service as including but not limited to family-based services, foster care, therapeutic foster care, group care, residential treatment, and psychiatric hospitalization for youth. The language required DFS to present a continuum of services plan to the Legislative Finance Committee (LFC) during calendar year 1991. The goal of that plan was to develop a comprehensive child welfare service system by July 1, 1993. The DFS response, presented in November, 1991, proposed implementing the plan during fiscal 1992. That implementation was accomplished as follows:

- 1) internal reorganization - the new program structure was completed before fiscal year end 1992;
- 2) family-based services in all regions - completed in January, 1992 with service to 76 families in fiscal 1992;
- 3) two therapeutic foster care programs - contracts negotiated in January, 1992 with Western Montana Mental Health Center in Kalispell and AWARE, Inc. in Butte - three children placed in June, 1992;

- 4) three group homes for dually diagnosed youth - three four-bed group homes in Butte occupied by 12 children in fiscal 1992;
- 5) targeted case management for seriously mentally ill children - to be implemented in Missoula and Helena - no children served by August, 1992;
- 6) management information system - completion expected December, 1994.

The goal of the continuum of care is to provide appropriate services to Montana children, including in-state services for children who had been placed out of state. This goal has been partially met through the development of therapeutic foster care programs and group homes for dually diagnosed youth. However, as discussed later in this report, the number of children placed out of state continues to increase. In addition, while the costs of comparable in-state and out-of-state services have increased at approximately the same rate, the mix of out-of-state services changed between fiscal 1989 and 1992 to include more expensive, intensive specialized services not available in Montana.

## Psychiatric Inpatient Hospital Treatment

Until the 1993 biennium, psychiatric inpatient hospitalization for emotionally disturbed, medicaid-eligible children was provided entirely by the Department of Social and Rehabilitation Services (SRS) through the medicaid program. However, the legislature transferred over \$5 million general fund for the 1993 biennium from SRS to DFS for in-patient hospital psychiatric treatment. These funds, included in the DFS foster care budget in House Bill 2, provide the general fund match for both children in the custody of DFS and other medicaid-eligible children who are hospitalized in facilities such as

the Rivendell or Shodair hospitals. Historically, in-patient hospital psychiatric treatment has not been included as part of the foster care program. Neither the general fund appropriated to DFS nor the federal medicaid match appropriated to SRS for in-patient hospital psychiatric treatment is included in this report.

### Psychiatric Residential Treatment

In House Bill 2, the 1991 legislature appropriated general fund of nearly \$2.8 million to DFS to fund a residential treatment continuum. Of that amount, \$1.3 million was specifically for medicaid psychiatric residential treatment services in the 1993 biennium. These funds are matched by federal funds appropriated to SRS and are used to serve all medicaid-eligible children who are placed at facilities such as Yellowstone Treatment Center in Billings. (A pilot program was enacted by the 1989 legislature in House Bill 304 and continued by the 1991 legislature in House Bill 977). This program was partially implemented in fiscal 1991 and fully implemented in fiscal 1992. These services are less intensive and less expensive than hospitalization.

Both the psychiatric inpatient hospital and residential treatment programs are "entitlement" programs, i.e., once recipients meet federal and state criteria, they are entitled to these benefits. The general fund medicaid match appropriated to DFS for these services must also be used to fund treatment for children not in the custody of DFS who are admitted to these facilities by parents/guardians.

## Foster Care Report

Foster care is provided through in-home services, family foster care, shelter care, group homes, and in-state and out-of-state residential treatment facilities such as the Intermountain Children's Home or Yellowstone Treatment Center. The April, 1990 LFA report provided foster care trends, demographic data, and expenditure and funding information from fiscal 1985 through fiscal 1989. The following report updates this information using data provided by DFS and analyzed by LFA staff. The report discusses data from fiscal 1985 through fiscal 1992 and emphasizes trends from fiscal 1989 through fiscal 1992.

Terms used in the following updated report are consistent with those used in 1990 LFA report. For example: 1) the term, "client" is used to denote a duplicated yearly count of children by type of facility because many foster care children are served in more than one type of facility during the year; 2) the term, "children," refers to unduplicated numbers of children entering foster care, served during each year, or in care at fiscal year end; 3) "IV-E funds" are those federal funds available for the care of eligible dependent children; and 4) "IV-B funds" are federal block grant funds used for foster care and social worker activities.

The 1990 LFA report raised issues concerning the levels of federal IV-E funds, parental contributions, and county funding. The Legislative Finance Committee (LFC) requested that DFS report on how it could increase collections of IV-E federal funds and parental contributions, but it took no action on the issue of county funding. The DFS response to the LFC's

request, submitted on September 30, 1990, estimated that with two additional administrative FTE it could: 1) increase parental contributions by \$55,000 in fiscal 1992 and \$110,000 in fiscal 1993; 2) increase federal IV-E administrative funds by approximately \$220,000 each year; and 3) increase the federal IV-E participation rate to approximately 26.6 percent for a \$330,000 increase in federal foster care funding in fiscal 1992. The FTE and funding increases were included in the 1993 biennial budget approved by the 1991 legislature. This report analyzes the preliminary fiscal 1992 collections data provided by the department.

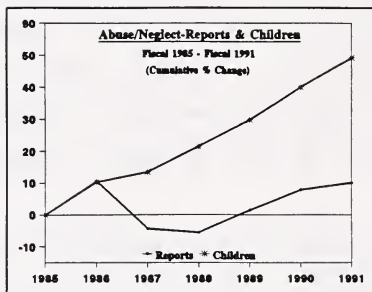
Special services, called "Prevention, In-Home, Post-Placement Services" (PIPPS), were implemented by the department in fiscal 1988. Fiscal 1988 and preliminary fiscal 1989 data were included in the 1990 LFA report. This report analyzes the PIPPS program from fiscal 1988 through the first half of fiscal 1992.

## FOSTER CARE REPORT UPDATE

This report summarizes and updates the April, 1990 LFA report entitled "Foster Care" and highlights foster care and expenditure issues that have developed since April, 1990. Fiscal 1992 comparisons come from preliminary data available as of June 30, 1992, unless otherwise noted. Reference tables in Appendix A provide detailed foster care information. All fiscal 1991 and 1992 data have been adjusted to exclude non-DFS medicaid-eligible children who are in residential treatment and to include all medicaid costs paid through SRS

for DFS medicaid-eligible children in residential treatment. In addition, special services costs for developmentally disabled children have been excluded.

## Continuing Foster Care Trends

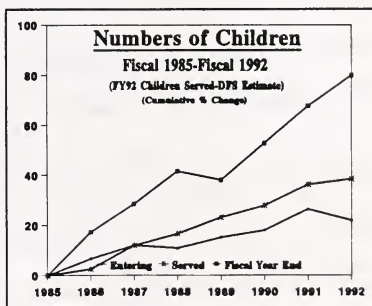


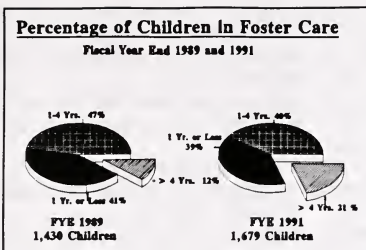
The adjacent graph shows that reports to DFS of child abuse and neglect increased approximately 10 percent from fiscal 1985 through fiscal 1991, while the number of children involved in the reported incidents increased by 49 percent in

the same period (Table 1). However, the percentage of children in reported incidents who actually enter foster care decreased from 24.5 percent in fiscal 1985 to an estimated 20.8 percent in fiscal 1991 (Table 2). Fiscal 1992 reported incidents were not available at the time this report was written.

As shown in the adjacent graph, the number of children served in each fiscal year continues to increase more rapidly than the number of children entering foster care. As a result, the number of children in care at fiscal year end increased by over 80 percent from 1,027 in fiscal 1985 to 1,849 in fiscal 1992

(Tables 3 and 4).



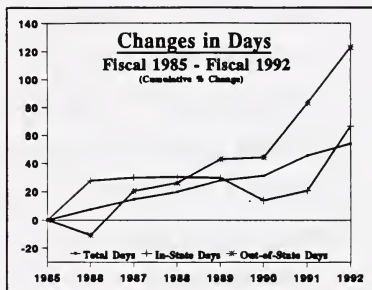


been in foster care more than one year increased slightly from 59 percent in fiscal 1989 to 61 percent in fiscal 1991, as shown in the above graph (Table 5). In addition, as shown in the "cut" slice of the above graph, those in care over 4 years increased from 12 percent of the population at FYE 1989 to 21 percent at FYE 1991.

The adjacent graph shows that the number of care days provided in residential treatment grew faster than total foster care days. Available data does not suggest any clear reasons for this shift in the foster care service mix, but there may be

at least one contributing factor. In fiscal 1991, the year medicaid coverage was first available for residential psychiatric treatment, these services began to increase significantly. Because the medicaid program is an "entitlement" program, the inclusion of residential psychiatric treatment as a medicaid service may have contributed to increased utilization of the service, both in and out-of-state. If a foster care child is medicaid-eligible and residential psychiatric

The group of "long term" children in care more than one year may be increasing as a percentage of total children in the system. The percentage of all children in care in fiscal year end snapshots who have



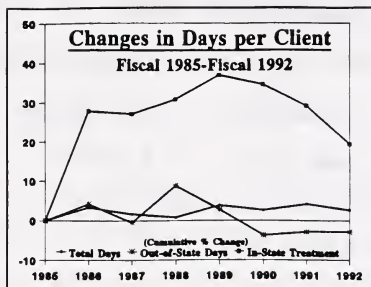
treatment is deemed medically necessary, the child is entitled to the treatment and the state is obligated to pay for the treatment. Additionally, when this service became a medicaid service, the state general fund had to bear only 28 percent of the cost of providing the service.

In-state treatment days increased by nearly 67 percent from fiscal year 1985 to fiscal 1992, while out-of-state treatment days increased by 123 percent in the same period. These increases are significantly greater than the average 54 percent increase in total care days in the fiscal 1985 to 1992 period. Foster care and shelter care days increased less than 50 percent during the same period (Table 6). In-state treatment days increased by 47 percent from fiscal 1990 to 1992, while out-of-state treatment days increased by 55 percent in the same two year period.

From fiscal years 1985 through 1992, the number of clients receiving out-of-state residential treatment increased three times as rapidly as the number of clients receiving in-state treatment. Between fiscal 1990 and fiscal 1992, the number of in-state treatment clients increased by 65 percent, while the number of out-of-state treatment clients increased by 54 percent (Table 7). One of the factors contributing to this large increase in the number of clients served in psychiatric residential treatment may be the implementation of the medicaid entitlement for these services.

The average number of care days per client (excluding PIPPS) in all types of facilities increased by 2.7 percent from fiscal 1985 to fiscal 1992, as shown on the following graph. However, this small increase masks significant changes in the days per client in the individual services. Family foster care

days per client increased 11.6 percent. Days per client decreased 12.5 percent in shelter care and 35.7 percent in group homes. The number of days per DFS client in in-state residential treatment increased by 37 percent from fiscal 1985 to



fiscal 1989, but decreased 13 percent from fiscal 1989 to fiscal 1992 as shown in the graph above (Table 8). The days per client in out-of-state residential treatment decreased 2.8 percent since fiscal 1985, but are nearly unchanged since fiscal 1990.

The preceding graphs illustrate that rapid growth in residential treatment in the past two years is primarily the result of increases in the number of clients, rather than increased care days per client. While placement of children in out-of-state treatment facilities increased more than placement in in-state facilities from fiscal 1985 to fiscal 1990, the use of both in-state and out-of-state treatment facilities has accelerated dramatically during fiscal years 1991 and 1992.

The average number of placements per child receiving new placements each year declined from 2.5 in fiscal 1985 to 2.3 in fiscal 1991, indicating that children are being moved less frequently in fiscal 1992 than they were in fiscal 1985 (Table 9).

## Demographic Data

The profile of children entering foster care, as measured by the following criteria, changed little from fiscal 1985 through the first half of fiscal 1992: 1) Age - As a percentage of total children, slight decreases occurred in the under-five-year and 15 year and older age groups, while a slight increase occurred in the 5-14 year age group (Table 10).

2) Race - The number of Native American children as a percentage of all children entering foster care increased from 15 percent in fiscal 1985 to 22 percent in fiscal 1990 (Table 11). When the 1991 legislature approved a 1993 biennium budget modification of nearly \$2.0 million for the care of Native American children, it anticipated service to 250 additional children. The number of Native American children entering the system declined to 20 percent of the total from fiscal 1990 to 1991, and there is no evidence of any increase in the first half of fiscal 1992.

3) Reasons for placement - As a percentage of total reasons for placement, a slight increase in abuse, neglect, and sexual abuse has been offset by a slight decrease in adjudication by the youth court (Table 12). The number of children adjudicated as delinquent youth or youth in need of supervision increased as a percentage of total children entering the system from fiscal 1985 through fiscal 1988 before starting to decrease in fiscal 1989. The number of children having this youth court legal status continued to decrease slightly from 33 percent of all children entering foster care in fiscal 1989 to 31 percent in fiscal 1991 (Table 13). These statistics do not indicate that the

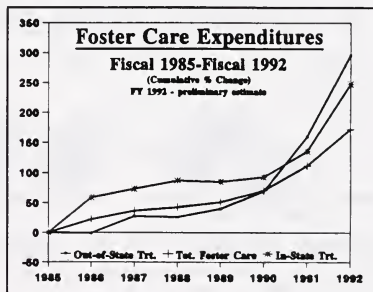
foster care population has become more difficult or would require more restrictive, intensive treatment services than were provided in fiscal 1989.

## FTE and Expenditure Trends

Case loads and expenditures continue to increase. In spite of the 8.0 additional social worker FTE approved by the 1991 Legislature for fiscal 1992, the estimated number of children in reported incidents per social worker FTE increased from 42.2 in fiscal 1988 to 51.8 in fiscal 1992 (Table 14).

Total foster care expenditures have increased from \$6.1 million in fiscal 1985 to an estimated \$16.6 million in fiscal 1992. However, over half of this 173 percent increase has occurred since fiscal 1990. The largest dollar increases occurred in in-state and out-of-state residential treatment, up 248 percent and 296 percent respectively since fiscal 1985 (Table 15).

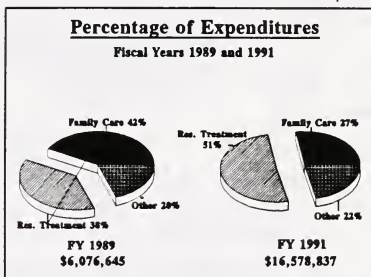
As the adjacent graph shows, expenditures for out-of-state and in-state residential treatment increased much more rapidly than total foster care expenditures from fiscal year 1985 through fiscal year 1992. If the number of foster care days



continues to increase at an annual 6 percent rate as it did between fiscal 1991 and fiscal 1992, and if the service mix and provider rates do not change, total foster care costs could be nearly \$20 million annually by the end of the 1995 biennium.

The out-of-state treatment expenditure increase results from a 123 percent increase in care days (Table 6) and a 78 percent increase in average costs per day since fiscal 1985 (Table 16). The entire increase in average daily costs for out-of-state treatment costs occurred between fiscal years 1989 and 1992, the result of compounding an approximate 14 percent increase due to more intensive care with an approximate 58 percent increase in daily rates.

In-state treatment cost increases resulted from a 67 percent increase in numbers of care days (Table 6) and a 109 percent increase average costs per day (Table 16) between fiscal 1985 and 1992. Between fiscal 1989 and 1992, the increases in total in-state treatment expenditures were entirely the result of a 57 percent increase in provider rates and a 29 percent increase in the number of days of service. The mix of children in intermediate and intensive treatment did not change.



As a result of rapidly escalating costs for in-state and out-of-state residential treatment, the mix of foster care expenditures has changed significantly since fiscal 1985. As the adjacent graph shows, only 38 percent of the foster care budget was spent for residential treatment in fiscal 1985, while 42 percent was spent for family foster care. However, in fiscal 1992, 51 percent of the foster care budget was spent for residential care and only 28 percent for family foster care. A much larger portion of the foster care budget is now spent on

expensive, more restrictive and intensive services, while a much smaller portion is spent on the least restrictive, least expensive family care.

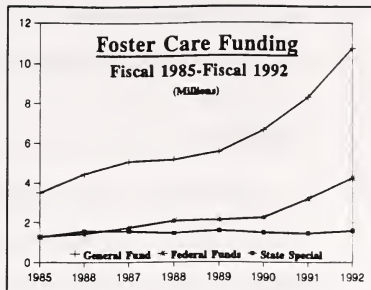
## Funding

Foster care is funded from three sources (Table 17): 1) general fund; 2) state special funds; and 3) federal funds. State special funds are third party payments, including parental contributions, and foster care payments from "non-state-assumed" counties (all counties except Cascade, Deer Lodge, Flathead, Lake, Lewis and Clark, Lincoln, Mineral, Missoula, Park, Powell, Ravalli, and Silver Bow). Foster care in non-assumed counties (an obligation of the county poor fund) is capped at the total fiscal 1987 expenditure level for each county, according to Section 41-3-1122, MCA, and the state general fund makes up the difference. The fiscal 1987 level for county funding was \$1,139,650, based on the foster care requirements in each county. However, those requirements have changed, perhaps because of population mobility, resulting in lower needs in some counties and higher needs in others. Each county pays for its foster care needs, up to the cap, but counties with needs in excess of the cap are not obligated to pay for the additional service. Therefore, because some counties are paying less than in fiscal 1987, the total foster care payments collected from the counties in each fiscal year is less than the capped amount.

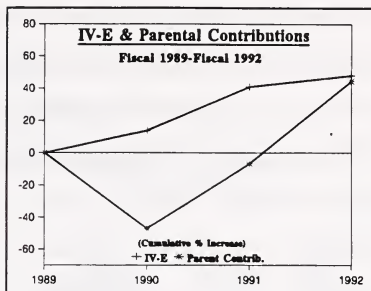
Federal funds, primarily IV-E funds for dependent children, also include IV-B foster care block grant funds and funds for the care of refugees.

As shown in the following graph, general fund and federal funds have increased substantially from fiscal 1985 to fiscal 1992. General fund increased

over 206 percent from \$3.5 million in fiscal 1985 to \$10.8 million in fiscal 1992, while federal funds increased 227 percent from \$1.3 million to \$4.2 million. The general fund share of expenditures increased from 58 percent in fiscal 1985 to 65



percent in fiscal 1992. State special revenues (county and third party payments) increased only 24 percent from \$1.3 million to \$1.6 million during the same period.



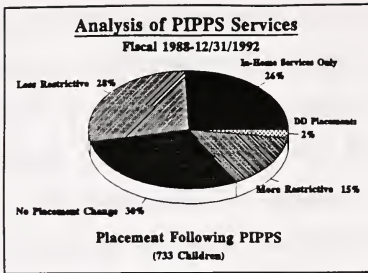
The April 1990 "Foster Care Report" raised issues concerning the levels of federal IV-E payments and parental contributions received by DFS. In response, department officials stated that new procedures could increase IV-E payments to 26.6

percent of foster care expenditures, excluding general fund expenditures for youth court placements and third party payments. This goal was not met. As shown on the above graph, revenues increased by 48 percent between fiscal 1989 and fiscal 1992. While IV-E payments increased by more than the anticipated dollar amount, the collections were the result of case load and cost increases. The IV-E collections were 23.8 percent of adjusted expenditures, rather than the 26.6 percent as anticipated.

DFS also estimated that new procedures for collecting parental contributions would increase collections by \$55,000 from \$91,118 in fiscal 1989 to \$146,118 in fiscal 1992. This goal was not met. As the above graph indicates, parental contributions fell from \$91,118 in fiscal 1989 to \$48,305 in fiscal 1990 before recovering to an estimated \$131,674 in fiscal 1992. The 45 percent net increase in parental contributions from fiscal 1989 to fiscal 1992 includes contributions for PIPPS clients. It must be noted that parents are not billed when their children receive medicaid services provided in psychiatric residential treatment.

## **PREVENTION, IN-HOME, POST-PLACEMENT SERVICES (PIPSS)**

The PIPPS program, implemented administratively in fiscal 1988 with the department's general fund appropriation, is designed to provide flexibility for funding special services not available under other department programs. According to a December 1991 draft of the proposed policy on PIPPS, these funds are to be used only for services designed to: 1) eliminate the need for removal of children from their homes or allow them to return home from foster care; 2) prevent placement of children in a more restrictive level of care; and 3) facilitate the placement of youth in a lower or less restrictive level of care. Special services covered by this program include psychological and other evaluations of families, in-home services, therapy, co-payments for cooperative funding with other agencies, and supplemental services provided by youth care facilities.



PIPPS placements are analyzed according to the above criteria, utilizing the last PIPPS service received by each child during the period fiscal 1988 through the first half of fiscal 1992. The adjacent graph shows that 26 percent of the

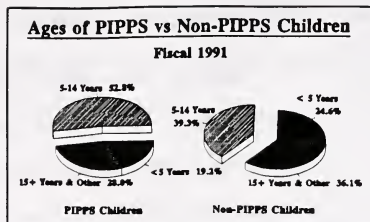
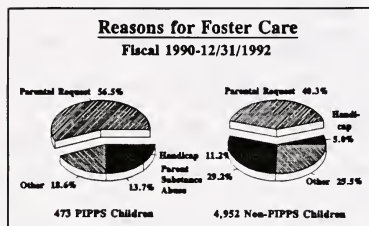
733 children receiving PIPPS during the period achieved goal #1 above by remaining in their homes. Fifty-eight percent of the children receiving PIPPS were subsequently moved to less restrictive placements or did not change placement in accordance with goals #2 and #3 above. PIPPS goals were not achieved for 15 percent of the children who were moved to more restrictive placements following their last PIPPS.

While it is not possible to know if PIPPS actually prevented out-of-home placement for children served, PIPPS may be providing more services to more children, i.e. "widening the net." Twenty-six percent of PIPPS children receive services only in the home, often at parental request. These services are provided to children who might otherwise never enter the foster care system.

Seventy-four percent of PIPP services are provided to children already in out-of-home placements. It is impossible to determine whether additional services provided in these settings eliminate the need for more restrictive services or reduce the length of stay in the system. It is possible that the PIPPS program is providing miscellaneous out-of-home services that might not otherwise be provided.

A comparison of fiscal 1991 PIPPS recipients with children who did not receive PIPPS in that year reveals differences in age and reason for placement. The adjacent graph shows that over half of the children

receiving PIPPS are 5-14 years of age, while less than 40 percent of the children who did not receive PIPPS were 5-14 years old (Tables 18 and 19).



The service reason differences between PIPPS and non-PIPPS children are shown in the adjacent graph for fiscal 1990 through the first half of fiscal 1992 (Table 20).

Parental request is at least one of the service reasons for over 56 percent of PIPPS children, while parental request is a service reason for only 40 percent of non-PIPPS children. In addition, service because of a handicap is twice as likely among PIPPS children, and service because of parental substance abuse is less than half the rate of that for non-PIPPS children. No significant differences existed between the two groups in child behavior or substance abuse, parental abuse and neglect, or adjudication.

## Placement of Children Receiving PIPPS

Children who received both out-of-home placements and PIPPS had a greater number of placements than children who did not receive PIPPS in the period fiscal 1990 through the first half of fiscal 1992. The 473 children who received both PIPPS and out-of-home services in that two-and-one-half year period had an average of 3.85 out-of-home placements per child, while 4,952 children who did not have PIPPS had an average of 2.86 out-of-home placements.

Placement data is derived from PIPP service records in the DFS data base. PIPP services recorded for some children in out-of-home care may actually be provided only to siblings still with the family, but the service records cannot be separated from those of children who actually received PIPPS. To the extent that this situation occurs, the number of out-of-home placements for PIPPS children is overstated, and the number of out-of-home placements for non-PIPPS children is understated.

Since there appeared to be no significant difference between PIPPS and non-PIPPS groups in severity of problems as measured by child substance abuse, behavior problems, parental abuse and neglect, or legal status, this above data support the conclusion that PIPPS does not reduce the number of foster care placements per child. In fact, the provision of PIPPS designed to facilitate the placement of youth in the least restrictive level of care may contribute to an increased number of placements. Because some of these placements may be lateral (moving from one setting to another setting at the

same level of restrictiveness) or moving from a more restrictive to less restrictive setting, the number of placements per PIPPS child may not be an accurate measure of the success or failure of the program.

## Return to Out-of-Home Care After PIPPS

Return to out-of-home care is defined here as re-entry into out-of-home placement as a new case in the year following completed out-of-home placement services. Analysis of the numbers of children served in fiscal 1990 who returned to out-of-home care in fiscal 1991 shows little difference between the children who had received PIPPS and those who had not. Twenty of 187, or 10.7 percent of the children who had received both PIPPS and out-of-home placements in fiscal 1990, returned to out-of-home placements in fiscal 1991. By comparison, 312 of 3,047, or 10.2 percent of the children who had not had PIPPS in fiscal 1990, returned to out-of-home care in fiscal 1991. These data suggest that PIPPS may not reduce the rate at which children re-enter the foster care system.

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TABLE 1  
Reports of Child Abuse/Neglect  
Fiscal 1985 through Fiscal 1992

	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Pct. Incr.* FY85/FY91
Reports								
Annual % Change-# Reports	6,361	7,036	6,083	6,008	6,453	6,852	6,996	9.98%
Cum. % Change-# Reports	0.00	10.61%	-13.54%	-1.23%	7.41%	6.18%	2.10%	--
		10.61%	-4.37%	-5.55%	1.45%	7.72%	9.98%	--
# Children-Reported Incidents	7,328	8,081	8,300	8,884	9,487	10,256	10,935	49.22%
Annual Change-# Children	0.00	10.28%	2.71%	7.04%	6.79%	8.11%	6.62%	--
Cum. % Change-# Children		10.28%	13.26%	21.23%	29.46%	39.96%	49.22%	--

TABLE 2  
Children in Reported Incidents vs Children Entering Foster Care  
Fiscal 1985 through Fiscal 1992

	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Pct. Incr. FY85/FY91
Children								
In Reported Incidents	7,328	8,081	8,300	8,884	9,487	10,256	10,935	49.22%
Entering Foster Care	1,796	1,915	2,011	1,991	2,068	2,118	2,270	26.39%
In Foster Care as % of Total	24.51	23.70	24.23	22.41	21.80	20.65	20.76	-15.30%



TABLE 5  
Analysis of Foster Care Open Services  
June 30, 1989 Compared to June 30, 1991\*

Max. Time in System	Total Children		Under 5 Years		5-14 Years		15-17 Years		18 Years and Over	
	Fiscal 1989	Fiscal 1991	Fiscal 1989	Fiscal 1991	Fiscal 1989	Fiscal 1991	Fiscal 1989	Fiscal 1991	Fiscal 1989	Fiscal 1991
1 Year	593	656	170	173	245	304	171	170	7	9
2 Years	320	304	76	70	137	143	89	81	18	10
3 Years	170	202	36	44	82	98	31	46	21	14
4 Years	182	173	13	24	98	97	49	30	22	22
5 Years	58	111	5	8	30	64	15	14	8	25
Over 5 Years	107	233	0	0	52	121	36	63	19	49
Total	1,430	1,679	300	319	644	827	391	404	95	129
Over 1 Yr. as % of Total	58.5%	60.9%	43.3%	45.8%	62.0%	63.2%	56.3%	57.9%	92.6%	93.0%
4 Yr. & Over % of Total	11.5%	20.5%	1.7%	2.5%	12.7%	22.4%	13.0%	19.1%	28.4%	57.4%

\*Preliminary data as of 12-31-91 - Includes PIPPS

TABLE 6  
Total Foster Care Days by Type of Facility  
Fiscal 1985 through Fiscal 1992

Service	Fiscal 1985		Fiscal 1986		Fiscal 1987		Fiscal 1988		Fiscal 1989		Fiscal 1990		Fiscal 1991		Fiscal 1992*		Pct. Incr. FY85/FY92
	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992*	Fiscal 1991	Fiscal 1992*	Fiscal 1990	Fiscal 1991	Fiscal 1991	Fiscal 1992*	Fiscal 1992*	Fiscal 1992*	
Family Foster Care	253,710	264,056	277,279	297,844	318,300	340,458	376,105	378,217	376,105	378,217	340,458	376,105	376,105	378,217	378,217	378,217	49.07%
Shelter Care	15,452	19,195	21,002	20,047	22,319	19,421	19,521	22,746	19,521	22,746	19,421	19,521	19,521	22,746	22,746	22,746	47.20%
Group Home	25,134	27,799	32,319	30,245	33,503	31,325	37,724	39,700	31,325	37,724	33,503	37,724	37,724	39,700	39,700	39,700	57.95%
In-State Residential Treatment	37,061	47,357	48,177	48,314	48,092	42,152	44,756	61,817	48,092	44,756	42,152	44,756	44,756	61,817	61,817	61,817	66.80%
Out-of-State Residential Treatment	12,005	10,718	14,461	15,152	17,175	17,324	22,007	26,806	17,175	22,007	17,324	22,007	22,007	26,806	26,806	26,806	123.29%
Total Care Days	343,362	369,125	393,238	411,602	439,389	450,680	500,113	529,286	439,389	500,113	450,680	500,113	500,113	529,286	529,286	529,286	54.15%
Total Cum. % Inc. from FY 1985	0	7.50%	14.53%	19.87%	27.97%	31.26%	45.65%	54.15%	27.97%	31.26%	31.26%	45.65%	45.65%	54.15%	54.15%	54.15%	--
Cum. % Inc. In-State	0	27.78%	29.99%	30.36%	29.76%	13.74%	20.76%	66.80%	29.76%	13.74%	13.74%	20.76%	20.76%	66.80%	66.80%	66.80%	--
Cum. % Inc. Out-of-State Treat.	0	-10.72%	20.46%	26.21%	43.07%	44.31%	83.32%	123.29%	43.07%	44.31%	44.31%	83.32%	83.32%	123.29%	123.29%	123.29%	--

\*DFS 1992 fiscal year end estimate

**TABLE 7**  
**Total Foster Care Clients by Type of Facility\***  
**Fiscal 1985 through Fiscal 1992**

Service	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992**	Pct. Incr. FY85/FY92
Family Foster Care	1,727	1,760	1,901	1,984	2,133	2,145	2,305	2,304	33.41%
Shelter Care	646	674	758	817	847	997	1,065	1,063	64.55%
Group Home	199	265	258	305	256	245	267	488	145.23%
In-State Residential Treatment	225	224	229	224	213	190	259	313	39.11%
Out-of-State Residential Treatment	56	48	68	65	78	84	106	129	130.36%
Special Services				19	141	222	377	244	73.05%
Total	2,853	2,971	3,214	3,414	3,668	3,883	4,379	4,541	59.17%
Annual Inc.-Placement Services	--	4.14%	8.18%	5.63%	3.89%	3.80%	9.31%	7.37%	
Annual Inc.-PIPPS Services	--	--	--	--	642.11%	57.45%	69.82%	-35.28%	

\* Children may have been served in more than one type of facility

\*\*DFS 1992 fiscal year end estimate

**TABLE 8**  
**Average Foster Care Days per Client by Type of Facility**  
**Fiscal 1985 through Fiscal 1992**

Service	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992*	Pct. Incr. FY85/FY92
Family Foster Care	147	150	146	150	149	159	163	164	11.56%
Shelter Care	24	28	28	25	26	19	18	21	-12.50%
Group Home	126	105	125	99	131	128	141	81	-35.71%
In-State Treatment	165	211	210	216	226	222	213	197	19.39%
Out-of-State Treatment	214	223	213	233	220	206	208	208	-2.80%
Average**	120	124	122	121	125	123	125	123	2.65%
Cum. Inc. - In-State Treatment	--	27.88%	27.27%	30.91%	36.97%	34.55%	29.09%	19.39%	--
Cum. Inc. - Out-of-State Treatment	--	4.21%	-0.47%	8.88%	2.80%	-3.74%	-2.80%	-2.80%	--
Cum Increase from Fiscal 1985	--	3.33%	1.67%	0.83%	3.82%	2.59%	4.14%	2.65%	--

\*DFS fiscal 1992 year end estimate

\*\*Excludes PIPPS clients

TABLE 9  
Placements per Child  
Fiscal 1985 through Fiscal 1992

Category	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992	Pct. Incr. FY85/FY92
Numbers of Placements*	6,075	5,160	5,405	5,659	6,110	6,111	6,493	6,795	11.85%
Children Entering New Placements	2,481	2,145	2,240	2,317	2,470	2,559	2,754	2,961	19.35%
Average Placements per Child	2.45	2.41	2.41	2.44	2.47	2.39	2.36	2.29	-6.53%

\*New placements begun for all children in each fiscal year - excludes placements begun in prior years

TABLE 10  
Numbers of Children Entering Foster Care by Age Group\*  
Fiscal 1985 through Fiscal 1992

Age Group	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992**	Pct. Incr. FY85/FY91
Less than 5 Years	468	456	497	504	564	550	596	307	27.35%
5 to 14 Years	676	738	720	737	833	880	970	468	43.49%
15 to 17 Years	581	651	682	655	617	667	672	337	15.66%
18 Years and Over	71	70	112	100	80	72	86	70	21.13%
Unknown	0	0	0	0	1	10	17	18	
Total	1,796	1,915	2,011	1,996	2,095	2,179	2,341	1,200	30.35%
% Change from Previous Year		6.63%	5.01%	-0.75%	4.96%	4.01%	7.43%	--	
Less than 5 Years	26.06%	23.81%	24.71%	25.25%	26.92%	25.24%	25.46%	25.58%	-2.30%
5 to 14 Years	37.64%	38.54%	35.80%	36.92%	39.76%	40.39%	41.44%	39.00%	10.09%
15 to 17 Years	32.35%	33.99%	33.91%	32.82%	29.45%	30.61%	28.71%	28.08%	-11.26%
18 Years and Over	3.95%	3.66%	5.57%	5.01%	3.82%	3.30%	3.67%	5.83%	-7.07%
Unknown	0.00%	0.00%	0.00%	0.00%	0.05%	0.46%	0.73%	1.50%	--

\*Includes PIPPS

\*\* Fiscal 1992 partial year data are not included in the percent increase column

TABLE 11  
Number of Children Entering Foster Care by Race\*  
Fiscal 1985 through Fiscal 1992

Race	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992**	Increase FY85/FY91
Caucasian	1,393	1,469	1,531	1,488	1,502	1,571	1,665	834	49.91 %
Native American	270	316	350	381	434	485	471	234	36.88 %
Hispanic	26	36	38	33	58	44	21	21	3.30 %
Other	107	94	92	94	101	90	161	111	9.91 %
Total	1,796	1,915	2,011	1,996	2,095	2,179	2,341	1,200	--
Indian children % of Total	15.03 %	16.50 %	17.40 %	19.09 %	20.72 %	22.26 %	20.12 %	19.50 %	--

\*Includes PIPPS

\*\*FY 1992 is a partial year not included in percent increase column

TABLE 12  
Number of Clients Placed by Placement Reason  
Fiscal 1985, 1989, 1991, and Half of Fiscal 1992\*

Reason	Fiscal 1985	Fiscal 1989	Fiscal 1991	Fiscal 1992**	Pct. Incr. FY85/FY91
Abuse	608	748	704	342	15.79 %
Neglect	734	1,002	1,138	579	55.04 %
Sexual Abuse	262	321	342	150	30.53 %
Child Substance Abuse	120	174	158	67	31.67 %
Child Behavior Problem	872	1,073	1,139	557	30.62 %
Adjudication	338	285	401	172	18.64 %
Total Placement Reasons	2,934	3,603	3,882	1,867	32.31 %
Abuse/Neglect/Sex Abuse % of Total	54.67 %	57.48 %	56.26 %	57.36 %	--
Child Substance Abuse/Behavior % of Total	33.81 %	34.61 %	33.41 %	33.42 %	--
Adjudication % of Total	11.52 %	7.91 %	10.33 %	9.21 %	--

\*Preliminary data as of 12-31-91 - includes PIPPS

\*\*FY 1992 is a partial year not included in percent increase column

TABLE 13

Comparison of Foster Care Children Having Youth Court Legal Status  
to Total Children Entering Foster Care\*  
Fiscal 1985 through Fiscal 1992

Children	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992**	Pct. Incr. FY85/FY91
Entering Foster Care	1,796	1,915	2,011	1,996	2,095	2,179	2,341	1,200	30.35%
Having Youth Court Legal Status	456	600	638	678	696	718	729	288	59.87%
% Entering with Court Status	25.39%	31.33%	31.73%	33.97%	33.22%	32.95%	31.14%	24.00%	22.65%

\*Includes PIPPS

\*\*FY 1992 is a partial year not included in percent increase column

TABLE 14  
Regional Staff Compared to Numbers of  
Children in Reported Incidents  
Fiscal 1988 through Fiscal 1992

Category	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992*	Pct. Incr. FY88/FY92
Number of Children	8,884	9,487	10,256	10,935	11,711	31.82%
Total Field Staff FTE	341.6	341.6	338.3	334.5	344.2	0.76%
Social Worker FTE	210.4	210.0	220.3	218.1	226.1	7.46%
Children/Total FTE	26.0	27.8	30.3	32.7	34.0	30.83%
Children/Social Worker FTE	42.2	45.2	46.6	50.1	51.8	22.67%

\*DFS 1992 fiscal year end estimate

TABLE 15  
Total Foster Care Expenditures by Type of Facility  
Fiscal 1985 through Fiscal 1992

Service	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991*	Fiscal 1992**	Pct. Incr. FY85/FY92
Family Foster Care	\$2,560,536	\$2,793,236	\$3,008,784	\$3,282,387	\$3,473,847	\$3,740,420	\$4,202,492	\$4,560,000	78.09%
Shelter Care	384,297	478,919	552,107	540,647	574,251	837,553	1,009,693	1,254,896	226.54%
Group Home	814,272	931,458	1,085,459	958,669	999,344	1,235,597	1,694,602	2,033,308	149.17%
In-State Residential Treatment	1,564,451	2,488,317	2,715,152	2,932,362	2,898,568	3,021,814	3,692,345	5,442,912	247.91%
Out-of-State Residential Treatment	753,089	748,550	961,534	951,556	1,056,833	1,275,042	1,962,469	2,984,721	296.33%
Special Services***	0	0	0	17,934	209,973	256,542	350,895	303,000	-
Total	\$6,076,645	\$7,440,480	\$8,323,036	\$8,683,555	\$9,212,816	\$10,366,968	\$12,912,496	\$16,578,837	172.83%

Increase from Previous Year

Tot. Cum. % Inc. from FY 85

In-State Cum % Inc. FY 85-92

Out-of-State Cum. % Inc. FY 85-92

\*Includes \$716,262 in SRS federal medicaid match for in-state treatment (implementation of HB 304)

\*\*DFS 1992 fiscal year end estimate - in-state treatment excludes \$406,417 general fund for non-DFS children and includes \$1,321,537 of SRS federal medicaid match for DFS children

\*\*\*Excludes Special Services Expenditures for Developmentally Disabled

TABLE 16  
Average Daily Costs by Type of Facility  
Fiscal 1985 through Fiscal 1991

Service	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992	Pct. Incr. FY85/FY92
Family Foster Care	\$10.09	\$10.58	\$10.85	\$11.02	\$10.91	\$10.99	\$11.17	\$12.06	19.46%
Shelter Care	24.87	24.95	26.29	26.97	25.73	43.13	51.72	55.17	121.83%
Group Home	32.40	33.51	33.59	31.70	29.83	39.44	44.92	51.22	58.09%
In-State Treatment	42.21	52.54	56.36	60.69	60.27	71.69	82.50	88.05	108.58%
Out-of-State Treatment	62.73	69.84	66.49	62.80	61.53	73.60	89.17	111.35	77.50%

TABLE 17  
Foster Care Funding  
Fiscal 1985 through Fiscal 1992

Fund Type	Fiscal 1985	Fiscal 1986	Fiscal 1987	Fiscal 1988	Fiscal 1989	Fiscal 1990	Fiscal 1991	Fiscal 1992*	Pct. Incr. FY85/FY92
General Fund	\$3,510,968	\$4,442,184	\$5,061,802	\$5,161,797	\$5,552,799	\$6,663,243	\$8,292,057	\$10,759,616	206.46%
State Special - County	862,796	1,155,602	1,139,650	986,723	1,114,591	995,680	958,172	977,827	13.33%
State Special - Other Contrib.	403,978	413,449	398,870	469,639	359,193	431,079	397,663	463,589	
State Special - Parent Contrib.					91,118	48,305	84,972	131,674	
Total State Special	\$1,266,774	\$1,569,051	\$1,538,520	\$1,456,362	\$1,564,902	\$1,475,064	\$1,440,807	\$1,573,090	24.18%
Misc. Federal Funds	1,298,903	1,429,245	1,722,714	2,065,399	279,595	163,076	620,947	1,559,022	--
Federal IV-E					1,815,520	2,065,585	2,538,685	2,687,109	--
Total Federal	\$1,298,903	\$1,429,245	\$1,722,714	\$2,065,399	\$2,095,115	\$2,228,661	\$3,179,632	\$4,246,131	226.90%
Total Funding	\$6,076,645	\$7,440,480	\$8,323,036	\$8,683,558	\$9,212,816	\$10,366,968	\$12,912,496	\$16,578,837	172.83%
Cum. & Change Since FY85									
General Fund Cum. % Change	--	26.52%	44.17%	47.02%	58.16%	89.78%	136.18%	206.46%	--
State Special Cum. % Change	--	23.86%	21.45%	14.97%	23.53%	16.44%	13.74%	24.18%	--
Federal Cum. % Change	--	10.03%	32.63%	59.01%	61.30%	71.58%	144.79%	226.90%	--
Total Cum. % Change	--	22.44%	36.97%	42.90%	51.61%	70.60%	112.49%	172.83%	--
Cum. % Change Since FY89									
Parent Contrib. Cum. % Change	--	--	--	--	--	46.99%	6.75%	44.51%	--
Federal IV-E Cum. % Change	--	--	--	--	--	13.77%	40.93%	48.01%	--
Total Cum. % Change	--	--	--	--	--	12.53%	40.16%	79.95%	--

\*DFS 1992 fiscal year end estimate - includes general fund supplemental and federal medicaid match for DFS children. Excludes general fund residential treatment match for non-DFS children, special services to DD children and in-patient psychiatric treatment match.



TABLE 19  
Numbers of Children Who Have Never Had PIPPS by Age Group  
Fiscal 1988 through First Half of Fiscal 1992

Age Group	Fiscal 1988*	Fiscal 1989*	Fiscal 1990	Fiscal 1991	Fiscal 1992	Pct. Incr.** FY90/FY91
Less than 5 Years	162	296	538	602	358	11.9%
5 to 14 Years	317	442	859	962	609	12.0%
15 to 17 Years	262	426	740	761	485	2.8%
Over 17 Years & Other***	23	42	107	120	130	12.1%
Total	764	1,206	2,244	2,445	1,582	9.0%
Less than 5 Years	21.20%	24.5%	24.0%	24.6%	22.6%	2.7%
5 to 14 Years	41.49%	36.7%	38.3%	39.3%	38.5%	2.8%
15 to 17 Years	34.29%	35.3%	33.0%	31.1%	30.7%	-5.6%
Over 17 Years	3.01%	3.5%	4.8%	4.9%	8.2%	2.9%

\* Fiscal 1988 and fiscal 1989 data include only those children whose cases remained open on 6/30/89

\*\* FY 1988, 1989, and 1992 are partial years not included in percent increase calculations

\*\*\*FY 1992 - "Over 17 Years and Other" includes children for whom birthdates are unknown

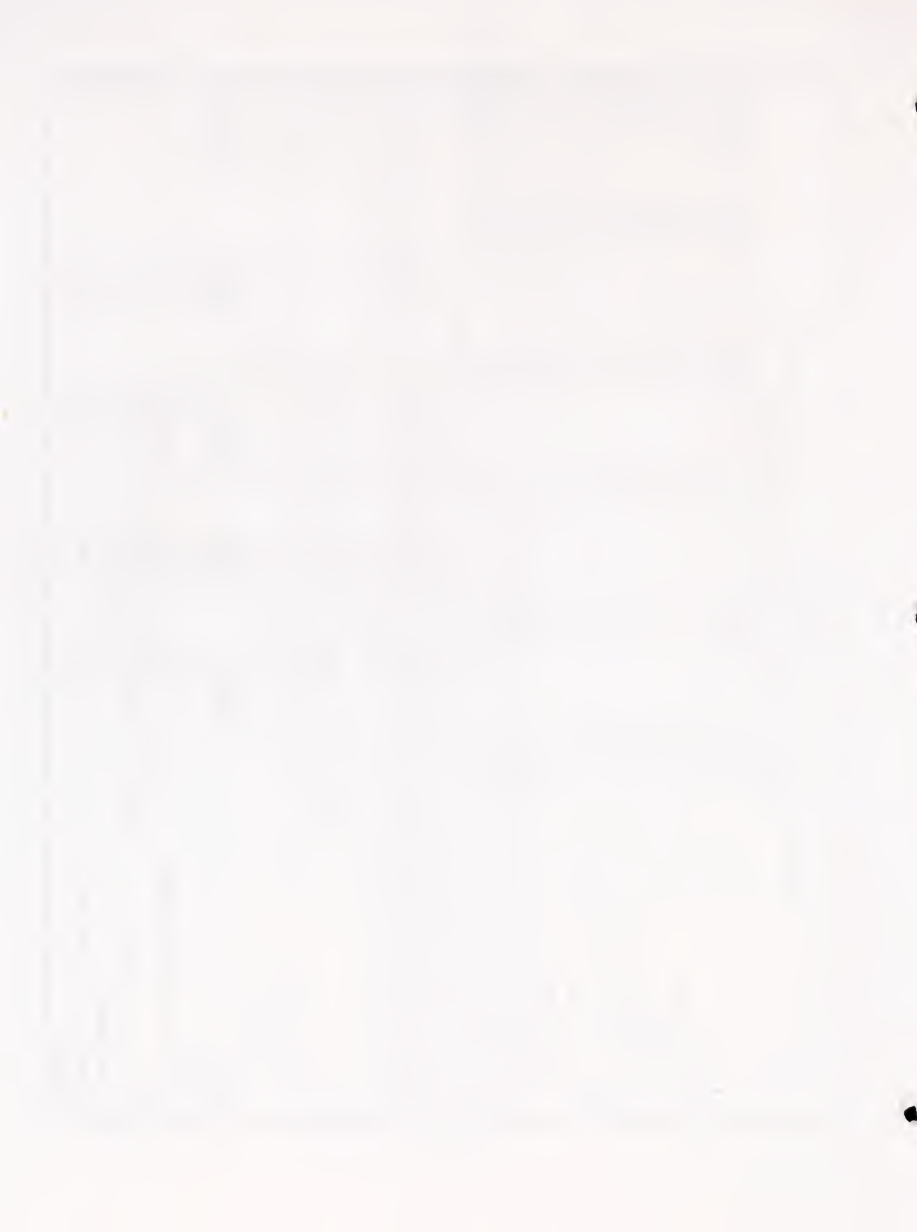
\* Fiscal 1988 and fiscal 1989 data include only those children whose cases remained open on 6/30/89

\*\* FY 1988, 1989 and 1992 are partial years not included in percent increase calculations

\*\*\*FV 1997 - "Over 17 Years and Other" includes children for whom birthdates are unknown

TABLE 20  
PIPPS Only Compared to Non-PIPPs Service Reasons  
Fiscal 1990 through First Half of Fiscal 1992

Reason	-----PIPPS Only-----		-----No PIPPS-----		% PIPPS Only/ % No PIPPS
	Number of Children	% of 161 Children	Number of Children	% of 4,952 Children	
Handicap	18	11.2%	250	5.0%	2.2
Child Drug or Behavior Problem	69	42.9%	2,274	45.9%	0.9
Neglect	71	44.1%	2,359	47.6%	0.9
Abuse, Including Sexual Abuse	35	21.7%	949	19.2%	1.1
Parental Request	91	56.5%	1,995	40.3%	1.4
Parental Drug or Alcohol Abuse	22	13.7%	1,445	29.2%	0.5
Adjudication	23	14.3%	861	17.4%	0.8





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